## MDR Tracking Number: M5-04-1922-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June17, 2001 and Commission Rule 133.305 titled Medical Dispute Resolution- General, 133.307 and 133.308 titled Medical Dispute Resolution by Independent Review Organizations, the Medical Review Division assigned an IRO to conduct a review of the disputed medical necessity issues between the requestor and the respondent. This dispute was received on 02/27/04.

The Requestor has submitted a written request to withdraw all Medical Necessity issues. However, other unresolved fee issues exist in the dispute.

Pursuant to Rule 133.308(s), if an unresolved fee dispute issue exists at the time the Division receives the IRO decision in a dispute, the Division shall then proceed to resolve the medical fee dispute in accordance with Rule 133.307.

On April 15, 2004, the Medical Review Division submitted a Notice to requestor to submit additional documentation necessary to support the charges and to challenge the reasons the respondent had denied reimbursement within 14 days of the requestor's receipt of the Notice.

CPT code 97265 for dates of service 7/16/03, 7/21/03, & 7/30/03 was denied with PEC G- include in Global, & 717- The value of this procedure is included in the value of another procedure performed on this date. Upon reconsideration, the carrier states on the Explanation of Benefits that this procedure has been determined to be a global fee per a SOAH decision & references case Curtis Adams DC vs. Texas Mutual Insurance. SOAH decisions are made on a case by case basis. Per Rule 133.304 (c), the carrier shall provide sufficient explanation to allow the sender to understand the reasons for the insurance carrier's actions. A generic statement does not satisfy the requirements of this section. Furthermore, per the 1996 Medical Fee Guideline, 97265 is not global or included in the value of another procedure. Payment recommended as follows:

•  $$43.00 \text{ (MAR)} \times 3 \text{ (dates of service)} = $129.00$ 

On this basis, and pursuant to §§402.042, 413.016, 413.031, and 413.019 of the Act, the Medical Review Division hereby ORDERS the respondent to pay the unpaid medical fees in accordance with the fair and reasonable rate as set forth in Commission Rule 133.1(a)(8) plus all accrued interest due at the time of payment to the requestor within 20 days of receipt of this order. This Order is applicable to dates of service 7/16/03 through 7/30/03 totaling \$129.00 in this dispute.

This Decision and Order is hereby issued this 7th day of April 2005.

Benita Diaz Medical Dispute Resolution Officer Medical Review Division